

09/485,005

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 485005	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1		51						
2		1		1		1	52						
3		2		2		2	53						
4		0		2		2	54						
5		0		3		3	55						
6		0		3		3	56						
7		0		3		3	57						
8		0		0		0	58						
9		0		0		0	59						
10		0		0		0	60						
11		0		0		0	61						
12		0		0		0	62						
13		0		0		0	63						
14		0		0		0	64						
15		0		0		0	65						
16		0		0		0	66						
17		0		3		3	67						
18		0		0		0	68						
19		0		0		0	69						
20		0		0		0	70						
21		0		0		0	71						
22		0		0		0	72						
23		0		0		0	73						
24		0		0		0	74						
25		0		0		0	75						
26							76						
27						0	77						
28						3	78						
29						3	79						
30						3	80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1		1		1		TOTAL IND.						
TOTAL DEP.	25		33		36		TOTAL DEP.						
TOTAL CLAIMS	26		34		37		TOTAL CLAIMS						

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS & AMENDMENTS

U.S. DEPARTMENT OF COMMERCE
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